

Louisville Metro Police Department Recruitment & Selection Unit

Recruit Applicant
Background Booklet & Pre-Polygraph Information

ATTENTION!

THE INFORMATION YOU ARE PROVIDING IN THIS DOCUMENT WILL BE THE SAME INFORMATION OUR DEPARTMENTAL POLYGRAPH DETECTIVES WILL BE DISCUSSING WITH YOU IF YOU SHOULD ADVANCE TO THAT STAGE OF THE BACKGROUND PROCESS. PLEASE MAKE SURE YOUR RESPONSES TO ANY QUESTIONS IN THIS BOOKLET ARE TRUTHFUL. CHANGING ANSWERS AT THE POLYGRAPH STAGE MAY BE GROUNDS FOR DISMISSAL FROM THAT EXAMINATION AND FROM THE BACKGROUND PROCESS ENTIRELY.

Instructions to the applicant:

- The information you provide in this Background Investigation & Pre-Polygraph Booklet will be used in the background investigation and polygraph exam to assist in determining your suitability for the position of Louisville Metro Police Officer.
- Type in your responses to all the items and questions. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response. If you cannot obtain or remember certain information, indicate so in your response.
- If you need more space for any response, use the last page of this form and identify the additional information by the question number.
- You must bring a copy of this pre-screen booklet with you on the day of your scheduled polygraph exam. If you do not have it, you will not be able to test and may be eliminated from the hiring process. Print the booklet, single sided, no duplexing.
- Please park in a garage or lot near 7th and Jefferson Streets. Do not park at a parking meter on the street.
- Take the elevators in the lobby of LMPD Headquarters to the 2nd Floor and have a seat in the waiting area.

Be complete, honest and specific in your responses!

Contact Information:

Name of Applicant:			
	Last	First	MI
Nicknames or Aliases:			
City:	State:	Zip:	
Home Phone #:	Cell #:	Alternate #:	
Primary Email:	Secondary Email	l:	
Personal Data:			
Date of birth (mm/dd/yyyy):	Age:	SS#:	
Are you a United States citizen?	Yes No		
If you are not a United States citiz	en, have you applied for citizenship?	Yes No	
Race:	Explain:		
Marital Status:	Explain:		
Gender: Ht:	Wt: Hair color:	Eye color:	
Driver License State:	Driver License #:	Exp. Date:	
Education:			
High School:	Location:		
Year of Graduation:			
Current/Most Recent College:	City/State:		
Degree:		GPA:	
Second Most Recent College:			
Degree:		GPA:	
Military Service:			
Current Military Branch			
Branch:	Highest Rank Held:	Last M.O.S.:	
Type of Discharge:	Dates of Service (by year) From:	To:	
Past Military Branch			
Branch:	Highest Rank Held:	Last M.O.S.:	
Type of Discharge:	Dates of Service (by year) From:	To:	

Relatives:

If the relative is deceased, just type "Deceased" in the name section. If you do not have the listed relative, type "N/A" (not applicable) in the name section.

Father's Full Name:		
Address:		
City:		Zip:
Home Phone #:		
Mother's Full Name:		
Address:		
City:		Zip:
Step-Mother's Full Name:		
Address:		
City:	~	
Home Phone #:		
T		
Step-Father's Full Name:		
Address:		
City:		Zip:
II DI "		
T '1 A 1 1		

Father-in-Law's Full Name:		
Address:		
City:		Zip:
Home Phone #:		
Email Address:		
Mother-in-Law's Full Name:		
Address:		
City:	a	
Home Phone #:		
Brother's Full Name:		
Address:		
City:		77'
Home Phone #:		
Work Phone #:		
Brother's Full Name:		
Address:		
City:	State:	Zip:
Home Phone #:		
Work Dhone #.		
Email Address:		

	Zip:
State:	
	Zip:
	State: State: State: State:

Spouse/Significant Other:

Spouse's/Domestic Partner's Fu	ıll Name:			
Address:				
City:		~	Zip:	
Home Phone #:				
Call Phona #:				
Personal Email Address:				
Place of Employment:		Positio	on Held:	
Place of Employment Address:				
~!		~	Zip:	
Work Phone #:				
Work Email Address:				
DOB:	Age:		Gender:	
Race:	Hair Color:		Eye Color:	
How long have you known you	r spouse/domestic partne	er?		
Is there, or has there ever been, effect for this individual?	a domestic violence ord		er in	Vo
If yes, please explain:				

Former Spouse/Significant Other:

Former Spouse's/Domestic Partner	er's Full Name:				
Address:					
City:		State:		Zip: _	
Home Phone #:					
Call Dhona #					
Personal Email Address:					
Place of Employment:		Posit	ion Held: _		
Place of Employment Address: _					
City:		State:		Zip: _	
Work Phone #:					
Work Email Address:					
DOB:	Age:		Gende	er:	
Race:	Hair Color:		Eye C	olor:	
Provide the dates in which you w spouse/domestic partner:	ere with your former				
Date of dissolution of marriage:					
Is there, or has there ever been, a effect for this individual?	domestic violence orde	er or restraining or	rder in	Yes	☐ No
If yes, please explain:					

Children:

List all of your living children, including natural, adopted, step and/or foster care. Include any other children who reside with you. Provide the name and contact information of the other parent with which you have the child.

Child's Full Name:							
Address:							
C:				State:		Zip:	
Home Phone #:					_		
Cell Phone #:							
Other Parent:							
_						Gender:	
☐ Natural	Adopted		Step		Foster	Other	
Employer/School A	Attending:						
Child's Full Name:							
Address:							
City:				State:		Zip:	
Cell Phone #:							
Other Parent:							
		Age:				Gender:	
Natural	Adopted		Step		Foster	Other	
Employer/School A	Attending:						

Child's Full Name:							
Address:							
City:				State:			Zip:
Home Phone #:					_		
Call Dhama #.					_		
Other Parent:							
		Age:				Gender:	
Natural	Adopted		Step		Foster		Other
Employer/School A	Attending:						
Child's Full Name:							
Address:							
City:				State:		<u>—</u>	Zip:
Home Phone #:					<u> </u>		
Cell Phone #:					<u> </u>		
Other Parent:							
Race:		Age:				Gender:	
Natural	Adopted		Step		Foster		Other
Employer/School A	Attending:						

Social References:

Please provide the following references. Understand that these individuals will be required to provide a letter of recommendation for you during the background investigation phase of the process. Do not put down anyone that won't be willing to write such a recommendation.

A social reference is defined as a person who is a friend. Current LMPD officers cannot be used as a social reference!

Home Phone #: Cell Phone #: Personal Email Address: Place of Employment: Place of Employment Address:	Zip:	State:	Address:
City: State: Z Home Phone #: Cell Phone #: Personal Email Address: Place of Employment: Position Held: Place of Employment Address: City: State:	Zip:	State:	
Home Phone #: Cell Phone #: Personal Email Address: Place of Employment: Place of Employment Address: City: State:			
Cell Phone #: Personal Email Address: Place of Employment: Place of Employment Address: City: State:			Home Phone #:
Personal Email Address: Place of Employment: Place of Employment Address: City: State: Work Phone #:			
Place of Employment Address: City: Work Phone #:			
City: Work Phone #:		Position Held:	Place of Employment:
City: Work Phone #:			Place of Employment Address:
	Zip:		~!
			Work Phone #:
Gender:			Gender:
How long have you known this person?			How long have you known this person?
How did you meet this person?			How did you meet this person?

Social Reference # 2

Full Name:			
Address:			
City:	C	7.	
Home Phone #:			
Cell Phone #:			
Personal Email Address:			
Place of Employment:	Position He	eld:	
Place of Employment Address:			
City:	State:	Zip:	
Work Phone #:			
Work Email Address:			
Gender:	_		
Trow dra you meet and person.			

Professional References:

Please provide the following references. Understand that these individuals will be required to provide a letter of recommendation for you during the background investigation phase of the process. Do not put down anyone that won't be willing to write such a recommendation.

A professional reference is defined as a person who is or was your boss, a teacher/professor or someone of higher authority over you. Current LMPD officers cannot be used as a professional reference!

Professional Reference # 1		
Full Name:		
Address:		
City:		Zip:
Home Phone #:		
Cell Phone #:		
Personal Email Address:		
Place of Employment:	Position H	Held:
Place of Employment Address:		
City:	C	
Work Phone #:		
Work Email Address:		
Gender:		

Professional Reference # 2

Full Name:		
Address:		
City:	_	Zip:
Home Phone #:		
Cell Phone #:		
Personal Email Address:		
Place of Employment:	Position He	ld:
Place of Employment Address:		
City:		
Work Phone #:		
Work Email Address:		
Gender:		
How long have you known this person?		
How did you meet this person?		

Selective Service:

If you are male, born after 1960, Federal Law requires you to have registered with the Selective Service. If you do NOT have a Selective Service number, you are in violation and your application cannot be processed. To locate your Selective Service Registration Number, go to http://www.sss.gov/.

Provide your Selective Service Number	:	
Provide the Date of Registration:		
Military Service:		
Have you ever served in a military orga	nization? Yes No	
Current Military Branch		
Branch:	Highest Rank Held:	Last M.O.S.:
Type of Discharge:		
Supervisor's Name:		's Phone #:
Past Military Branch		
Branch:	Highest Rank Held:	Last M.O.S.:
Type of Discharge:	Dates of Service (by year) From:	To:
Supervisor's Name:	Last Supervisor	's Phone #:
Past Military Branch		
Branch:	Highest Rank Held:	Last M.O.S.:
Type of Discharge:	Dates of Service (by year) From:	To:
Supervisor's Name:	Last Supervisor	's Phone #:

Military Service:

List all military awards you have received.
List any certifications received in the military.
List any dissipling you received and the systems of that dissipling
List any discipline you received and the outcome of that discipline.
List any reasons for leaving one military organization to join another.
List any reasons for reaving one mintary organization to join another.

Employment:***If you are under legal contract with any employer, you must ascertain if you are able to accept a position with the LMPD should you be hired. The LMPD will not "buy out" an applicant's existing contract. It is the applicant's responsibility to determine his/her existing contract guidelines before applying and communicate those guidelines to the LMPD.***

I have read and understand the above statement.		
	Siş	gnature
Most recent job first!		
Company Name:		
Address:		
City:		Zip:
Supervisor:	Title:	
Supervisor's Phone #:		
Last Position Held:		
Date of Employment (month/year) From	n to)
Reason for separation, if no longer employed at	this company:	
☐ Laid Off ☐ Resigned	Fired	
Other (explain in 100 words or less):		
Please explain your position at this employer ar	nd what you did on a daily basi	S.
Please explain any issues at this employer reg actions, any disciplinary actions, theft, poor atte		

Company Name:				
Address:				
City:		State:	Zip:	
Supervisor:				
Supervisor's Phone #:				
Last Position Held:				
Date of Employment (month/y	rear) From	- <u></u>	to	
Reason for separation, if no lo	nger employed at t	his company:		
Laid Off	Resigned	Fired		
Other (explain in 100 word	s or less):			
Please explain your position at	this employer and	what you did on a daily	hacie	
ricase explain your position at	tins employer and	what you did on a dairy	basis.	
Please explain any issues at t	hic amployar ragg	rding your involvement	in cavual haracement	inappropriata
actions, any disciplinary action				, шарргорпас

Company Name:			
Address:			
City:		Zip:	
Supervisor:			
Supervisor's Phone #:			
Last Position Held:			
Reason for separation, if no longer employed at this	company:		
Laid Off Resigned	Fired		
Other (explain in 100 words or less):			
Please explain your position at this employer and w	hat you did on a dail	ly hasis	
rease explain your position at this employer and wa	nat you are on a dan	ry ousis.	
Please explain any issues at this employer regardinactions, any disciplinary actions, theft, poor attendary	.		appropriate

Please list any other jobs you may have had prior to the address, telephone number and supervisor's name.	e last job liste	d. Please include the b	usiness nam	ie,
•				
Have you ever quit a job without proper notice?	Yes	☐ No		
If yes, please explain.				
Have you ever resigned in lieu of termination?	Yes	☐ No		
If yes, please explain.				
Have you ever been accused of discrimination (e.g. sex orientation harassment, etc.) by a co-worker, superior,			Yes	□No
If yes, please explain.				
Were you ever the subject of a written complaint at wo	ork? Y	es 🗌 No		
If yes, please explain.				

Have you ever been counseled at work due to lateness or absences?
If yes, please explain.
Have you ever received an unsatisfactory performance review?
If yes, please explain.
Have you ever sold, released or given away legally confidential information?
If yes, please explain.
Have you ever called in sick to work when you were neither sick nor caring for a sick
family member?
If yes, how many sick days have you used in the past five years which were not due to illness? Please explain.
In the past three years, have you missed work or been late to work due to drug or alcohol consumption?
If yes, please explain.
Has your work performance ever been affected by your use of alcohol or drugs?

If yes, please explain.				
In the past three years, have drinking or drug habits and	•	± • • •	Yes	☐ No
If yes, please explain.				
Have you ever applied to a	any other law enforcem	nent agency?	Yes	□ No
If yes, list EVERY agency yon the last page of this book		arting with the most recent. If m	nore space is 1	needed, continue
Address:				
			Zi _J	p:
Phone #:		Date Applied: _		
Background Investigator's	Name (if known): _			
Check each step in the pro	cess you completed an	d your current status:		
Steps				
☐ Application	Written	Physical Agility	O	ral Interview
Polygraph	Background	Chief's Oral Interview		Iedical
Status				
Hired	On List	Withdrawn	\square D	isqualified
Please explain if you did n	ot get selected or with	drew from the process.		

Name of Agency:			
Address:			
City:		~	Zip:
Phone #:		Date Applied:	
Background Investiga	ator's Name (if known):		
Check each step in th	e process you completed an	nd your current status:	
Steps			
Application	Written	Physical Agility	Oral Interview
Polygraph	Background	Chief's Oral Interview	Medical
Status			
Hired	On List	Withdrawn	Disqualified
Please explain if you	did not get selected or with	drew from the process.	
			_
Name of Agency: _			
			Zip:
DI II		D (A 1' 1	
Background Investiga	ator's Name (if known):		
Check each step in th	e process you completed an	nd your current status:	
Steps			
Application	☐ Written	Physical Agility	Oral Interview
Polygraph	Background	Chief's Oral Interview	Medical
Status			
Hired	On List	Withdrawn	Disqualified
Please explain if you	did not get selected or with	drew from the process.	
-	<u> </u>		

Name of Agency: _			
Address:			
City:		Q	Zip:
Phone #:		Date Applied:	
Background Investiga	ator's Name (if known):		
Check each step in the	e process you completed an	nd your current status:	
Steps			
Application	Written	Physical Agility	Oral Interview
Polygraph	Background	Chief's Oral Interview	Medical
Status			
Hired	On List	Withdrawn	Disqualified
Please explain if you	did not get selected or with	drew from the process.	
Address:			Zip:
Address:		State:	Zip:
Address: City: Phone #:		State:	<u> </u>
Address: City: Phone #: Background Investiga		State: Date Applied:	<u> </u>
Address: City: Phone #: Background Investiga	ntor's Name (if known):	State: Date Applied:	<u> </u>
Address: City: Phone #: Background Investiga Check each step in the	ntor's Name (if known):	State: Date Applied:	<u> </u>
Address: City: Phone #: Background Investiga Check each step in the	ator's Name (if known): _ e process you completed an	State: Date Applied: d your current status:	
Address: City: Phone #: Background Investigate Check each step in the Steps Application	ntor's Name (if known): _ e process you completed an Written	State: Date Applied: d your current status: Physical Agility	Oral Interview
Address: City: Phone #: Background Investigate Check each step in the Steps Application Polygraph	ntor's Name (if known): _ e process you completed an Written	State: Date Applied: d your current status: Physical Agility	Oral Interview

Residential Information:

List your current address and then list previous addresses for the past five years as well as the length of time you resided at each location.

Current Home A	Address:			
City:			State:	Zip:
	ldress (month/year)			
Rent	Own			
List the names a each:	and associations of all p	persons residing with	nin this address and cont	act telephone numbers fo
1			Phone #: _	
Parent	Spouse	Child	Sibling	Other
2			Phone #:	
Parent	Spouse	Child	Sibling	Other
3.			Phone #:	
Parent	Spouse	Child	Sibling	Other
4.			Phone #:	
Parent	Spouse	Child		Other

1 st Former Home A	ddress:					
City:					Zip:	
Home Phone #:						
Years at this Addres				to		
Rent	Own					
2 nd Former Home A	ddress:					
City:			~		Zip:	
Home Phone #:						
Years at this Addres	ss (month/year)	From		to		
Rent	Own					
3 rd Former Home A	ddress:					
City:			State:		Zip:	
Home Phone #:						
Years at this Addres	ss (month/year)	From		to		
Rent	Own					
Have you ever been Have you ever left a If yes, please explai	residence owing re		ee? Yes	☐ No		

Traffic Violations:

List all citation traffic violations. This includes out-of-state violations as well!

Violation	Date	(mm/dd/yyyy)	State		Disposition	
List all states in which you have been issued a driver license.						
State		Driver License	#			
Has your driver licen	se ever been su	spended in any sta	te for any reason?	Yes	☐ No	
If yes, please explain						
List any vehicle accid	dents in which	you were at fault.				
Date (mm/dd/yyyy)		Loc	ation	Bri	ef Description	

Please be prepared to provide a copy of the accident report to your background investigator if you continue to that point.

Alcohol Use/History:

Have you operated a motor vehicle while intoxicated in the past 24 months?
If yes, how many times?
Please explain.
Have you been intoxicated in public in the last 24 months (2 years)?
If yes, how many times?
Please explain.
When was the last time you were intoxicated and why?
Have you ever been arrested or received a citation for an alcohol related offense?
If yes, explain the nature of the arrest/citation, including the date, circumstances of the offense and the final
outcome.

Arrest History:						
Have you ever been arre	sted? Yes No					
If yes, please provide the	If yes, please provide the following information:					
Date (mm/dd/yyyy)	Location (including state)	Offense	Disp	osition		
			†			
	<u> </u>					
·	sted for a domestic violence rel d include the circumstances of t f the case(s).	·	Yes	☐ No		
Have you ever had an emergency protective order or other domestic violence related protection order against you?						
If yes, please explain and include the circumstances in which the order was taken out, the dates in which the actions took place and the outcome of the case(s).						

Illegal Drug History:

Please complete the following table.

Drug Used	Date of First Use (mm/dd/yyyy)	Date of Last Use (mm/dd/yyyy)	Maximum Times Used	How Drugs Were Used	Number of Times Purchased
Marijuana					
Hashish					
PCP					
Angel Dust					
Amphetamines					
LSD					
Peyote					
Mescaline					
Heroin					
Cocaine					
Quaaludes					
Downers					
Tranquilizers					
Percocet					
Hydrocodone					
Ecstacy/XTC					
Darvocet					
Dilaudid					
Ketamine					
Speed					
Inhalents					
Meth.					
Mushrooms					
Xanax					
Adderall					
Oxycodone					
Ambien/Lunesta					
Anabolic Steroids					
Synthetic Cannabinoids					
Bath Salts					

Please complete the following table.

Type of Drug	Amount Sold	Date (mm/dd/yyyy)	Number of Times	Dollar Value

Have you ever taken someone else's pain medication or over-the-counter medication? If so, what were the circumstances to taking that medication? Please explain.
Please provide any additional information regarding your previous or current drug use that you believe would be important for us to know during this selection process.

Prior Polygraph Examinations:

Prior Polygraph Examination #1:	
When:	
Where (location test was given):	
Why:	
Who (name of examiner or agency):	
Prior Polygraph Examination #2:	
When:	
Where (location test was given):	
Why:	
Who (name of examiner or agency):	
Prior Polygraph Examination #3:	
When:	
Where (location test was given):	
Why:	
Who (name of examiner or agency):	
If more than three polygraph examinations, check here.	

Criminal History Questions:

Please complete the following questions.

1.	Have you ever taken the life of another person either intentionally or accidentally?	Yes	☐ No
If y	ves, please explain.		
2.	Have you ever taken part in the act of rape, either by force or threats of injury?	Yes	☐ No
If y	ves, please explain.		
3. If v	Have you ever taken part in any act involving hurting, harming, abusing, striking or injuring any person under the age of 15? ves, please explain.	Yes	☐ No
	es, prouse emplanti		
4. If y	Have you ever taken part in any act involving the intentional damage or destruction of any property belonging to another person?	Yes	☐ No
5.	Have you ever taken part in abducting another person? Yes Yes, please explain.	☐ No	
11 y	es, piease explain.		

6.	Have you ever been married to two or more people at the same time?	Yes Yes	☐ No
If ye	es, please explain.		
7.	Have you ever taken part in any act of entering or remaining on the property of another, knowing that you did not have permission of the owner?	Yes	□ No
If ye	es, please explain.		
8.	Have you ever taken part in any act involving the use of a firearm, knife, club or other deadly weapon; physical force, threats or intimidation in order to steal cash or property; or with the intent of committing another criminal act?	Yes	□No
If ye	es, please explain.		
9.	Have you ever taken part in any act involving hurting, harming or attempting to injure another person using a firearm, knife, club or any other deadly weapon?	Yes	☐ No
If ye	es, please explain.		
10.	Have you ever had any sex act after you turned 18 years of age with another person who was less than 14 years of age at the time of the act (examples: intercourse, oral sex or the touching of the breasts, genitals or anus of another		
T.0	person)?	∐ Yes	∐ No
If ye	es, please explain.		

11.	Have you ever exposed your anus or genitals in public to sexually arouse or to gratify another person?	Yes	□No
If ye	es, please explain.		
12.	Have you ever filed a false police report?	Yes	□ No
If ye	es, please explain.		
13.	Have you ever taken part in the theft of any vehicle, the use of any vehicle, or joy-riding in/on a vehicle without the owner's permission?	Yes	□ No
If ye	es, please explain.		
	Have you ever unlawfully possessed an explosive device, sawed off shotgun or rifle, machine gun, armor piercing ammunition or silencer?	Yes	□ No
	Have you ever carried a pistol, switchblade knife or any other illegal weapon? es, please explain.	Yes	□ No

16.	Do you have any debts to friends, family, employers or any other person as a result of any act of gambling?	Yes	□ No
If ye	es, please explain.		
17.	Have you ever been involved in or participated in any activity, which resulted in a police investigation, arrest and/or incarceration (this does not include traffic offenses, but does include any instance where charges were filed, warrants issued and/or bond posted)?	Yes	□ No
II ye	es, please explain.		
18.	Have you ever taken part in any act involving gambling (this includes, but is not limited to, placing a wager or bet to a bookmaker by phone or by hand on the results of any sport or by being "paid off" while playing an illegal slot or video poker machine)? es, please explain.	☐ Yes	□ No
19.	Have you ever taken or kept a child under the age of 18 out of the state in which the child resides, to violate a court order or judgment disposing of the child's custody?	Yes	□No
11 ye	es, please explain.		
20.	Have you ever caused, planned or started a fire or an explosion to damage or destroy a building, habitation or vehicle belonging to you or another person which was insured?	Yes	□ No
If ye	es, please explain.		

21.	Have you ever committed acts of cruelty to any creature or animal, which resulted in harm, injury or death (excludes legally licensed hunting or fishing)?	Yes	☐ No
If ye	es, please explain.		
22. If ye	Have you ever been involved in the telling of a lie, falsehood or any misrepresentation while under oath or on a sworn notarized statement? es, please explain.	Yes	□ No
23.	Have you ever been involved in resisting arrest or interfering with any police officer in making an arrest or detention? es, please explain.	Yes	☐ No
24.	Have you ever been a part of any sexual act, including, but not limited to, intercourse, oral or anal sodomy or any sexual contact with another person in exchange for cash or property of any value (include Nevada or other countries where prostitution is legal)? es, please explain.		□ No
25. If ye	Have you ever fled from police by foot, vehicle or any means to avoid arrest, detention or questioning? es, please explain.	Yes	☐ No
,			

26.	Have you ever been a part of any act involving forgery or counterfeiting or any writing, document, signature, money, license, contract, credit card receipt, security agreement, will, deed or any deed of trust with the intention to defraud or harm the person or business?	Yes	□ No
If ye	es, please explain.		
27.	Have you ever bribed or attempted to bribe any governmental officer or employee?	Yes	☐ No
If ye	es, please explain.		
28.	Have you ever been a part of impersonating a police officer, peace officer or any member of a law enforcement agency or other governmental agency? es, please explain.	Yes	☐ No
	Have you ever taken part in any action in which you were compensated money or anything of value for any act or prostitution committed by another by force or by threat of force to that person?	Yes	□ No
II ye	es, please explain.		

30.	Have you ever been a part of stealing of a credit card, presenting a credit card to obtain goods or services fraudulently or using a credit card without the permission of the person to whom the card was issued, using a fictitious card or number, any involvement in the manufacture of counterfeit credit card(s), buying credit card(s), or selling credit card(s) or in any way using a credit card to commit theft or any other crime?	☐ Yes	□ No
If ye	es, please explain.		
31.	Have you ever broken into a coin operated device with the intent to steal cash, property and merchandise or to obtain services?	Yes	☐ No
If ye	es, please explain.		1
32.	Have you ever broken into or entered a vehicle of any kind with the intent to steal cash, property or merchandise (this includes, but is not limited to, car, trucks, trailers, boxcars, vans or motor homes)?	Yes	□No
If ye	es, please explain.		
33.	Have you ever been involved in any type of the breaching of peace (this includes, but is not limited to, profane, vulgar or abusive language to incite a crowd, fighting or threatening another in a public place or looking into a window or opening in a building for lewd purposes)?	Yes	□ No
If ye	es, please explain.		

34.	Have you ever been involved in, whether alone or as a participant in a group/organization which seeks to further murder, arson, robbery, burglary, theft, kidnapping, assault, forgery gambling, prostitution, promotion or the distribution of drugs, promotion or distribution of obscene material or any other criminal act?	Yes	□No
If ye	s, please explain.		
35.	Have you been involved in any act of breaking into a building, habitation or any portion of a habitation or building with the intent to steal cash, property or merchandise or with the intent of committing another criminal act?	Yes	□No
If ye	s, please explain.		
36.	Have you unlawfully deprived an individual of property, cash or merchandise through appropriation, theft, theft by false pretense, theft from a person, swindling, passing a worthless check, embezzlement or extortion (this includes making false insurance claims)?	☐ Yes	□ No
If ye	s, please explain.		
37.	Have you been involved in the production, sale, distribution, promotion or possession with the intent to sell any picture, magazine, film, video or any item that patently depicts any sexual act (this includes any form of copulation, masturbation, excretory functions, sadism, masochism or bestiality)?	Yes	□ No
If ye	s, please explain.		

	Have you taken part in any sexual acts, after you were 21 years of age, with a person who was less than 16 years of age at the time of the act?	Yes	□ No
If ye	es, please explain.		
	At any time did you lie during this hiring process? es, please explain.	Yes	☐ No
	s, preuse explain.		
40. If ye	Have you ever assaulted another person by striking them with the intent to hurt that person (this includes any act of domestic violence, being served with an Emergency Protective Order (EPO), Domestic Violence Order (DVO) or any other court order)? es, please explain.	☐ Yes	□ No
41.	Have you ever been involved in any incestuous act of knowingly inflicting sexual contact or sexual penetration (this includes, but is not limited to, sexual intercourse, oral and anal intercourse with a natural child, stepchild or child by adoption; natural grandmother, step-grandchild or grandchild by adoption; sister or half-sister, brother or half-brother, niece or nephew)?	Yes	□ No
If ye	es, please explain.		
	Have you ever made annoying or obscene telephone calls? es, please explain.	Yes	□ No

43.	Have you committed any act that you believed, if it came out, would bring dishonor to you or the Louisville Metro Police Department?	Yes	☐ No
If yes, please explain.			
44.	Have you ever been refused a permit to carry a concealed weapon?	Yes	☐ No
If ye	es, please explain.		
45.	Are you now, or have you ever been, a member or associate of a criminal enterprise, street gang, or any other group that advocates violence against individuals because of their race, religion, political affiliation, ethnic origin, nationality, gender, sexual preference or disability?	☐ Yes	□ No
If ye	es, please explain.		
	Have you used any form of political leverage or personal contact to receive special privilege during the LMPD Selection Process?	Yes	☐ No
If yes, please explain.			

Please explain any other type of criminal activity or questionable activity that you have engaged in below OR use this section to continue explaining one of the previously asked questions from this section.			

Applicant Interview Questions:

1.	What do you consider to be your personal strengths?
2.	What do you believe are your personal weaknesses?
	That do you oom to me your personal memmesses.
3.	Describe how you manage your personal finances (e.g. are you in debt, do you spend above your means, etc.)?
	Ctc.):
4.	What do you consider to be good traits for a police officer?
5.	Why do you want to become a Louisville Metro Police Officer?

6.	Have you ever applied for employment with this department in the past? If yes, when and what occurred so that you are no longer being considered?
7.	How did you learn about the Louisville Metro Police Department (e.g. television, internet, radio advertisements)?
8.	How would you describe your ability to communicate with people? Please explain.
	The second of th
9.	Explain your personal work ethic.
10.	Describe your ability to work under pressure.

11.	Describe any past experience you may have had as a member of a team.
12.	What accomplishments in your life are you most proud of?
13.	What does the Louisville Metro Police Department have to offer you?
13.	what does the Louisvine Metro Ponce Department have to offer you?
14.	Why do you feel you are the most qualified person for this position?
15.	Do you personally, socially or otherwise, know any members of the Louisville Metro Police
15.	Department? If yes, who are they and how do you know them?
	The state of the s

16.	Please list any organizations or activities that you engage in (professionally or socially)?
17.	Do you have any tattoos? If so, where are they located and what are they/what do they say? (Be
	prepared to submit photographs of your tattoos.) Per LMPD policy, tattoos may not be visible while on
	duty, therefore if you have visible tattoos, you will be covering them with your uniform or some other type of garment (bandages, etc.).
	type of garment (bandages, etc.).
18.	Please list and explain what you believe are the top three most challenging issues facing law
18.	Please list and explain what you believe are the top three most challenging issues facing law enforcement today.
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	enforcement today.

High School Education:

You will be required to furnish transcripts, diploma or other proof to support all your educational claims.

High School Diploma	GED	Year Earned	l:
Last Attended High School #1:			
Dates Attended:			
Address:			
City:		State:	Zip:
Phone #:			
Previous High School #2:			
Dates Attended:			
Address:			
City:		State:	Zip:
Phone #:			
Previous High School #3:			
Dates Attended:			
Address:			
City:		State:	Zip:
Phone #:			

College Education:

You will be required to furnish transcripts, diploma or other proof to support all your educational claims.

Last Attended College:			
Dates Attended:			
Address:			
City:	State:		
Phone #:			
Degree earned, type of degree:			
If no degree earned, enter the number of credit hours:			
College:			
Dates Attended:	to		
Address:			
City:	State:	Zip:	
Phone #:			
Degree earned, type of degree:			
If no degree earned, enter the number of credit hours:			
College:			
Dates Attended:	to		
Address:			
City:	State:	Zip:	
Phone #:			
Degree earned, type of degree:			
If no degree earned, enter the number of credit hours:			

Trade, Vocational or Technical School Education:

You will be required to furnish transcripts, diploma or other proof to support all your educational claims.

Last Attended College:		
Dates Attended:		
Address:		
City:	State:	Zip:
Phone #:		
Degree earned, type of degree:		
If no degree earned, enter the number of credit hours:		
College:		
Dates Attended:	40	
Address:		
City:	State:	Zip:
Phone #:	<u></u>	
Degree earned, type of degree:		
If no degree earned, enter the number of credit hours:		-
College:		
Dates Attended:	to	
Address:		
City:	State:	Zip:
Phone #:		
Degree earned, type of degree:		
If no degree earned, enter the number of credit hours:		

Police Academy:

Last Attended Police Academy:		
Dates Attended:		
Address:		
City:	State:	Zip:
Phone #:		
Department/Agency, if applicable:		
Police Academy:		
Dates Attended:		
Address:		
City:	State:	Zip:
Phone #:		
Department/Agency, if applicable:		
Police Academy:		
Dates Attended:		
Address:		
City:	State:	Zip:
Phone #:		
Department/Agency, if applicable:		

Academic Information:

Have you ever had academic discipline, been suspended or expelled from any high school, college/university, business or trade school or police academy?	Yes	☐ No		
If yes, please explain.				
Please list any organizations, social or education, that you have taken part in while in school (include high school as well).				
Please list any sport you have played for any school, high school or college and the years you took part in this or these sports. Please include the name of the school as well.				

Financial Information:

For each of the following questions, please fill in the amounts to the nearest dollar.

From your employer, what is your take-home monthly income?	/month
Do you have income other than from your salary or wages?	
If yes, please explain and provide the amount.	
Funding Source	/month
Funding Source	/month
Have you ever filed for, or declared, bankruptcy (Chapter 7, 11 or 13)?	
Have any of your bills ever been turned over to a collection agency?	
Have you ever had purchased goods repossessed?	
Have your wages ever been garnished?	
Have you ever been delinquent on income or other tax payments?	
Have you ever failed to file or cheated/lied on an income tax form?	
Have you ever had an employment bond refused?	
Have you ever avoided paying any lawful debt by moving away?	
Have you ever defaulted on, failed to pay, a loan?	
Have you ever borrowed money to pay for a gambling debt?	
Have you ever spent money for illegal purposes (e.g. drugs, etc.)?	
Have you ever failed to make or been late on court-ordered payments (child support, restitution, alimony)?	
Have you ever written three or more bad checks in a one-year period? Yes No	
If you answered yes to any of the financial questions, please explain.	

Honesty & Countermeasures Certification:

Signature	Date
•	
Department's Selection Process.	
examination is being conducted will immediately result in my dismi	ssal from the Louisville Metro Police
Department's Selection Process. I also understand that any use of	countermeasures while the polygraph
or omission of material fact may disqualify me or result in my dismi	issal from the Louisville Metro Police
best of my knowledge, belief and are made in good faith. I understand the	hat any false information, misstatement

I do hereby certify that all statements made in this questionnaire/booklet are true, complete and correct to the